



BUILDING PERMIT APPLICATION

☐ **COMMERCIAL** ☐ **RESIDENTIAL**

✧ Application must be completed in **ink**. If submitting plans, please provide **two** copies. ✧

✧ Contact Development Services at (912)651-6510 for assistance. ✧

✧ Submit your Building Permit Application via fax (912)651-6543 or in person at 5515 Abercorn Street (31405). ✧

Project Site

Project/Business Name: _____ PIN: _____

Project Address: _____

Contacts

Property Owner: _____ Email: _____

Address: _____ City, State, Zip: _____ Phone: _____

Who will be responsible for this work? ☐ **Property Owner** ☐ **Tenant** ☐ **Authorized Agent** ☐ **Contractor**

Name: _____ Email: _____

Address: _____ City, State, Zip: _____ Phone: _____

Who do we contact for design explanations? ☐ **Property Owner** ☐ **Contractor** ☐ **Design Professional**

Name: _____ Phone: _____ Email: _____

Class of Work

☐ **New** ☐ **Addition** ☐ **Renovation/Repair** ☐ **Renovation/Repair (Exterior Only)** ☐ **Manufactured/Modular**

☐ **Other Building Related** (Example: barn, shed, roofing, siding, porch/deck, windows) ☐ **Other Non-Building Related** (Example: swimming pool)

NOTE: For demolition, sign, or fence, fill out separate application.

Proposed Use or Activity for this Permit

COMMERCIAL:

☐ Amusement/Recreational
☐ Antenna/Tower
☐ Assembly/Church

☐ Barber Shop/Salon
☐ Educational
☐ Factory/Industrial
☐ Hospital/Institutional

☐ Hotel/Motel
☐ Mercantile/Retail
☐ Multi-family (3+ units)
☐ Office/Professional

☐ Parking Garage
☐ Restaurant
☐ Shell
☐ Storage

RESIDENTIAL:

☐ Single Family
☐ Duplex
☐ Townhouse
☐ Garage/Carport

Current/Prior Use or Previous Business Name at this location: ☐ Same ☐ Other: _____

Description of Work

Complete Description of Work: _____

Building Square Footage: _____ # Stories: _____

☐ Primary Structure ☐ Accessory Structure – Attached ☐ Accessory Structure – Detached

Work to include: ☐ Electrical ☐ Plumbing ☐ Mechanical/HVAC ☐ Low Voltage ☐ Sprinkler/Fire Alarm

Are **Special Inspections** required for this project? ☐ Yes ☐ No If yes, who will be responsible for this work? _____

Is this a Property Maintenance Violation or Warning? ☐ Yes ☐ No If Yes, attach write-up from Property Maintenance Dept. _____

VALUATION OF JOB:

\$ _____

(COMMERCIAL: Estimate \$125 per SF for labor, materials & profit)

(RESIDENTIAL: Estimate \$80 per SF for labor, materials & profit)

General Contractor Information

Name: _____ License #: _____ Expiration Date: _____
Address: _____ City, State, Zip: _____
Phone: _____ Email: _____

Georgia Licensed Subcontractors to Work on Project

Electrical _____ Phone: _____
Plumbing _____ Phone: _____
Mechanical/HVAC _____ Phone: _____
Low Voltage _____ Phone: _____

Design Considerations

Water Service: ☐ City of Savannah ☐ Private Well ☐ Other: _____ Location & Size of Water Main: _____

Sewer Service: ☐ City of Savannah ☐ Septic Tank ☐ Other: _____ Location & Depth of Sewer Main: _____

Is property in a designated wetland? ☐ Yes ☐ No If yes, attach Corp. of Engineer's letter.

The property is in Flood Zone _____ If the structure is located in a Special Flood Hazard Area (SFHA), there may be additional requirements that must be met. Contact the City's Floodplain Administrator at (912)651-6510 for more information.

How many existing electrical meters?: _____ How many additional new meters?: _____

Is this project in a historic district? ☐ Yes ☐ No If Yes, is exterior work being performed? ☐ Yes ☐ No

If Yes, has a Certificate of Appropriateness (COA) been issued? ☐ Yes ☐ No

If Yes, plans must be stamped by the Historic Preservation Officer and a copy of the COA must be provided.

*If No, contact the **Historic Preservation Office** at (912)641-1440.*

Applicant Certification

I hereby certify that I have answered all of the questions contained herein and know the same to be true and correct. All work performed under this permit must comply with State Law and local ordinances. Further, I understand that any permit issued, based upon false information or misrepresentation provided by the applicant, will be null and void and subject to penalty as provided by law and ordinance.

I hereby certify that I have verified access to city water and sewer services for this property. Any necessary connection and requirements for service have been included in the design of these plans. If necessary, a separate Site Plan Application has been or will be submitted for review.

I understand there may be water and sewer impact fees that must be paid prior to the completion of this project.

Printed Name of Applicant (Not Company Name)

Signature of Applicant

Date

Note: For permit fee information, contact Development Services, view the City's Revenue Ordinance, or visit www.savannahga.gov and view the Building Permit Fees document. Fees can be paid by check or money order (no cash), or they can be paid online through eTRAC.

✧ Note: For **Commercial Building Renovations**, submit signed and approval "**Water & Sewer Approval Form**", unless a Site Development Permit is required for the project. ✧

FOR OFFICE USE ONLY

No Plans Submitted: _____ Zoning District: _____ Zoning Use: _____
Constr. Type: _____ Report Code: _____ Occupancy Type: _____
Flood Zone: ☐ X ☐ A ☐ AE ☐ VE LOMA: _____ COA Approved: _____
Firm Map #13051C- _____ -F BFE Cert. Needed: ☐ Yes ☐ No

Permit Fees: Total Permit: \$ _____
Due: \$ _____ Paid: \$ _____ Chk/MO#: _____
Rem. Bal.: \$ _____ Rem. Paid: \$ _____
Chk/MO#: _____

Plans Reviewed by: Flood: _____ Zoning: _____ Building: _____ Life Safety: _____ Elect: _____ Plumb: _____ Mech: _____